	this logar togeth	ner with applicable	or <u>Fax</u>	Mail Stop ISSUE Commissioner for P.O. Box 1450 Alexandria, Virgi (571)-273-2885	nia 22313-1450	igh 5 should be completed current correspondence add g a separate "FEE ADDRES	i where
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APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/652,144 08/29/2003 Kenneth W. Boyd TUC920030079US1 ITILE OF INVENTION: APPARATUS AND METHOD TO SELECT A CAPTAIN FROM A PLURALITY OF CONFROL NODES #1 FC:1501 1518.09 DA 02 FC:1504 300.00 DA							
APPI.N. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	JE PREV. PAID ISSUE	FEE TOTAL FEE	(S) DUE DATE DUE	;
nonprovisional	NO	\$1510	\$300	\$0	\$1810	0 02/18/2009	9
EXAMINI	ER.	ART UNIT	CLASS-SUBCLASS				
SWEARINGEN, JEFFREY R 2445			709-224000	J			
Change of correspondence CFR 1 363). Change of correspond Address form PTO/SB/1: "Fee Address" indicate PTO/SB/47; Rev 03-02 Number is required.	lence address (or Cha 22) attached, tion (or "Fee Address"	nge of Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. DALE F. REGELMAN 2 QUARLES & BRADY LLP				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) INTERNATIONAL BUSINESS ARMONK, NY MACHINES CORPORATION Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Covernment							
ta. The following fee(s) are Issue Fee Publication Fee (No s Advance Order - # of	mall entity discount p	ermitted)	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number090449 (enclose an extra copy of this form).				
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if reflaired) will not be accepted from anyone other than the applicant: a registered attorney or agent: or the assigner or other party in							
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Authorized Signature	Let t. V	DINNE	V \	Date February 10, 2009			
Typed or printed name Dale F. Regelman				Registration No. 45,625			
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